

FEE POLICY

The Bureau of Laboratories is only partially supported by legislative appropriations from State Funds. Therefore, we have been authorized to charge fees under certain conditions.

1. TEST FEES:

A fee is charged for those tests which benefit only the individual patient or which are readily available from private sources. A list of current billable tests and charges follows.

No fee is charged for tests considered Public Health Testing. These are paid for by tax monies.

Exempt from charges:

- A. Tests that are not reasonably available from qualified private laboratories
- B. Tests whose result is primarily of epidemiologic or public health significance.
- C. Tests run as a matter of bureau policy which are not requested by the physician.
- D. When the patient is medically indigent.

In this case, the physician will be billed, but may deduct the charges before remitting. See billing procedures.

- E. Repeat tests for Newborn Screening.

If the repeat test was requested by the Bureau of Laboratories, i.e., initial test was invalid due to early dismissal, or improperly collected specimen or insufficient quantity or other reason, there is no charge for the repeat test.

All other second or repeat tests are subject to the full fee.

2. RETRIEVAL OF RECORDS:

When minimal time (less than 15 minutes) is required to retrieve and copy requests for laboratory documents or records, no charge will be levied.

Requests for laboratory documents or records requiring more than 15 minutes retrieval and copy time, will be assessed a charge of \$20.00/ hour.

BILLING PROCEDURE

Bills are generated monthly and provide a line listing of patients and tests..

Bills are generated by [Sender and/or Billing number](#). These can be obtained by calling 896-0810.

Do not send payment with the specimen. **PAY ONLY WHEN YOU RECEIVE A BILL.**
Please do not send cash payments.

The bill will consist of two copies: The blue and white “remittance” copy must be returned with your payment for proper crediting of your account. The yellow “provider” copy should be retained for your records.

On the left side of the bill there is a column headed “Eligible for NON payment.” In this column, please place a “X” beside the name of any patient listed who is considered to be unable to pay for the test, ie indigent. Place the total charges for patients eligible for non-payment in the indicated space at the upper right-hand corner of the bill and deduct this amount from the total charges. Please indicate the amount remitted.

Billing is done through the DHEC Bureau of Finance, not the Laboratory. If an error is found on the bill, please write comments on the face of the bill or an attached sheet of paper and the problem will be corrected. You may also contact the DHEC Receivable Bureau of Finance at 898-3450 or the Bureau of Laboratories at 896-0942.

Delinquent accounts are subject to having test results withheld until the account is paid in full.